

VERIFICATION OF CHILD CARE BUSINESS

Applicant/Participant Name: _____

Social Security #: _____

Date: _____

I, _____, operate a child care business at the following address:
_____, I care for _____ number of
children at a total cost per month per child of \$ _____. My average gross (before
deductions) earnings from the operation of this business are \$ _____ per month. My net
earnings (after allowable business expense deductions) are \$ _____ per month.

Is the child care business operated in the unit for which you receive a rental
subsidy? ☐ Yes ☐ No

If YES, have you received permission from your landlord to operate the business
in the unit? ☐ Yes ☐ No

I certify that the above is correct.

Signature of applicant/participant

Date